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An
Inaugural Dissertation
On
Haemoptysis
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Haemoptysis.

The disease now about to be considered, is one in which there is a discharge of blood from the lungs, of a florid colour, brought up by more or less coughing, hawking &c; and generally preceded by a saltish taste in the mouth, and a sense of oppression about the præcordia, difficult respiration; and pain in some part of the thorax.

It is sometimes ushered in with pain in the breast, a hard, chorded pulse; sometimes it comes on with a cold stage, followed by some

degree of fever and ends in perspiration.

The disease most commonly makes its appearance as idiopathic, and then may usually be suppressed, and even finally cured in a short time; but sometimes it comes on as symptomatic of some other affec-tion, most commonly of phthisis pul-monalis; then it is to be looked upon as a violent disease, and every exertion should be used on the part of the practitioner to suppress the discharge, and remove the cause as soon as practicable. Of the two species, it is the idiopathic, of which I shall treat particularly.

The idiopathic form, may be distin-guished from the symptomatic, by the following symptoms; in the

first, there is generally more fever, more general excitement, and not so much pain in the thorax; again, it may be distinguished sometimes by a knowledge of the exciting cause; the idiopathic is most commonly brought on by some external exciting cause, whereas the symptomatic is the result of some peculiarity in the organization of the pulmonary apparatus, and constitution generally.

Haemoptysis is readily distinguished from haematemesis; in the last, blood is thrown up in larger quantities, and is of a darker colour; it is also sometimes mixed with the contents of the stomach, and it is commonly the case also, that

it is unattended by any cough; on the contrary, blood proceeding from the lungs, comes up in small quantities, of a more florid colour, commonly mixed with frothy matter, and is brought up by coughing, hawking &c.

This disease frequently comes on between the ages of fifteen and thirty years, or about the time the body is acquiring its full development; why the disease takes place at this particular period, I am unable to explain, nor have I ever seen, a satisfactory explanation given; it was the opinion of Dr. Cullen, that the lungs were the organs which gave precedence to all others in

point of development, and that there was generally an excessive quantity of blood determined to those particular organs; consequently nature resorted to that means of relieving the irritated viscus, and the system in general.

The ancients thought it to be a salutary operation of nature, and therefore endeavoured to encourage, rather than suppress the discharge, but happily for humanity, the moderns have innovated on such dangerous, and indiscriminating measures.

Causes The exciting causes of this disease are various; such as violent exercise, running, jumping, speaking very loud, singing, blowing wind

instruments, and many others of a similar nature; hence its frequent occurrence amongst musicians who exercise their lungs a great deal.

It is also brought on by blows on the breast, or back, falls, certain attitudes of the body, excesses of temperature, either hot or cold, breathing air so much rarefied as not to expand the lungs sufficiently, very often produce this affection, an excessive use of stimulating liquors have a tendency to the same end.

I believe it is pretty generally agreed on among practitioners that it is arterial blood, though it is not settled, whether it proceeds from rupture, or anastomosis;

it is my opinion, that it may pro-
-ceed from bath, as I can see nothing
in the organization of the blood
vessels of the lungs, more than
in any other part to prevent
rupture; I therefore am of the
opinion that it proceeds from
rupture when any violence
is done to the body, such as
falls, blows &c; and on the other
hand that it proceeds, from
effusion, when the body is
exposed to excessive heats, vio-
-lent fatigue, and some other
exciting causes.

Prognosis. Our prognosis with
regard to this disease must be
formed differently, according as
it may occur as a symptomatic

or idiopathic disease; it very fre-
-quently occurs as a precursor of
consumption, or some other dis-
-ease equally terrible. Though
it is not always a symptomatic
disease. When it occurs in consequence
of some violence having been
done to the patient, not prece-
-ded or followed by cough, and
no pain left in any part of
the thorax, it may be looked
upon as of little importance, and
from which there is little dan-
-ger to be apprehended.

But on the contrary, when the
patient can attribute it to no
particular cause, when it comes
on with some, or all the symp-
-toms enumerated above, such

as saltish taste in the mouth, pain in the breast, cough, some degree of fever, and also succeeded by the greater part of these, then we may look upon it as a terrible disease, and if not timely arrested it will run on to something very alarming.

Treatment. In entering on the treatment, if there should be a quick, strong, and hard pulse, the practitioner should feel no hesitation in drawing blood copiously from the general system, and also use topical bleeding from some part of the thorax by leeches, or scarifications and cups, particularly

if there be pain in that part. By early resorting to this invaluable remedy, we may probably check the haemorrhage, so far as to require nothing more except some gentle cathartic. Bleeding in this acts upon the principle of revulsion, that is, by drawing the blood from the deep-seated to the more superficial vessels, thereby lessening the impetus of the blood in the heart, and large arteries, and relieving the congested viscera. But should this remedy not have the desired effect, we may resort to astringents; such as common salt, a tea spoonful taken in the mouth, and allowed to

dissolve, or a solution of alum, to the amount of eight or ten grains in a small quantity of water, may be given. ℞. R. S. acetate of lead in the dose of two grains, and from that up to ten or twelve, combined with a small quantity of opium, to command its action, is in most cases of great service. In using astringents, we should pay particular regard to the state of the patient, and only use them where there is considerable activity in the sanguiferous system.

If the above remedies should not command the bleeding, we may under due limitations, resort to emetics; as the bleeding, how-
-ever,

may proceed from anastomosis, or may be caused by rupture of a large vessel, being then ~~then~~ copious, emetics may then probably be inappropiate, and would sometimes prove dangerous; but coming from the exhalents, and attended with some degree of oppression, there is no doubt but they may be classed among the most valuable remedies with which we are acquainted. Their action is very intelligible, and easy of explanation; they act, by unloading the stomach, and taking some degree of oppression from the lungs; and also from their centrifugal tendency, they force the blood towards the surface, and relieve

the pulmonary vessels of their engorgement. In this respect they act upon the same principle as blood-letting.

Digitalis is a medicine of immense value, in this class of diseases, and one which may be resorted to in almost every case, where there is too much excitement in the heart and arteries; of this medicine, we may give twenty or twenty-five drops of the tinct. and in alarming cases even more.

Blisters to the breast I think might be resorted to, and will prove of considerable service, when there is pain, cough, and expectoration, independent of the haemorrhage.

After having premised some

other general remedies, sinapisms, or blisters, applied to the extremities would add considerably to our other means of relief.

When the disease has run on so as to produce much debility, we must then resort to tonics; among these, the muriatic tincture of iron holds precedence, and should be given in the dose of ten or fifteen drops, three or four times in the day.

We should at the same time keep the bowels open with some mild cathartic, such as cream of tartar, epsom salts, castor oil, or something of the kind.

While using the foregoing remedies, the patient should be exposed to the cool air, and all

unnecessary company excluded; he should not be allowed to exert himself, either by turning himself in bed, talking, or in any other way; all bandages should be removed, and the patients head and shoulders elevated.

All causes which have a tendency to the least excitement in the system should be removed.

The patients regimen during convalescence, should be light but nutricious, such as the farinaceous substances, milk &c.

Persons subject to this disease, should wear flannel next to the skin; inhabit a warm climate, if practicable; take plen-
-ty

of exercise on horseback, though not to such an extent as to induce fatigue. Persons thus affected should observe prudence in every thing.
